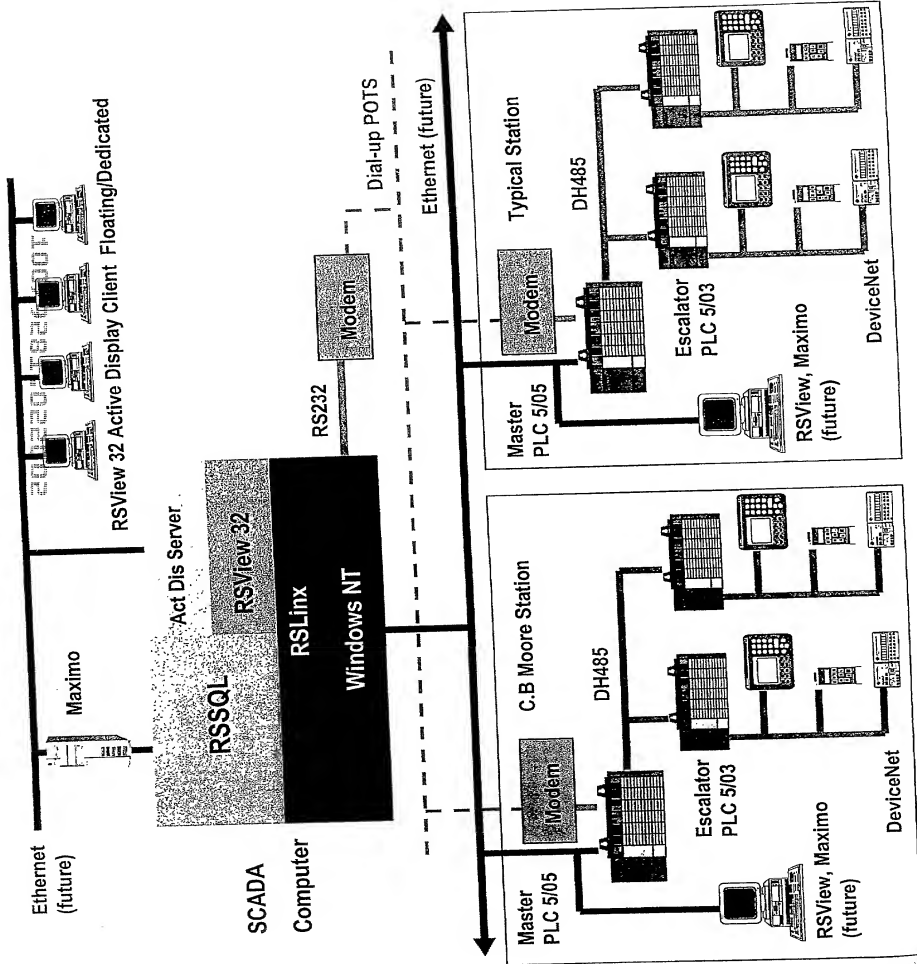
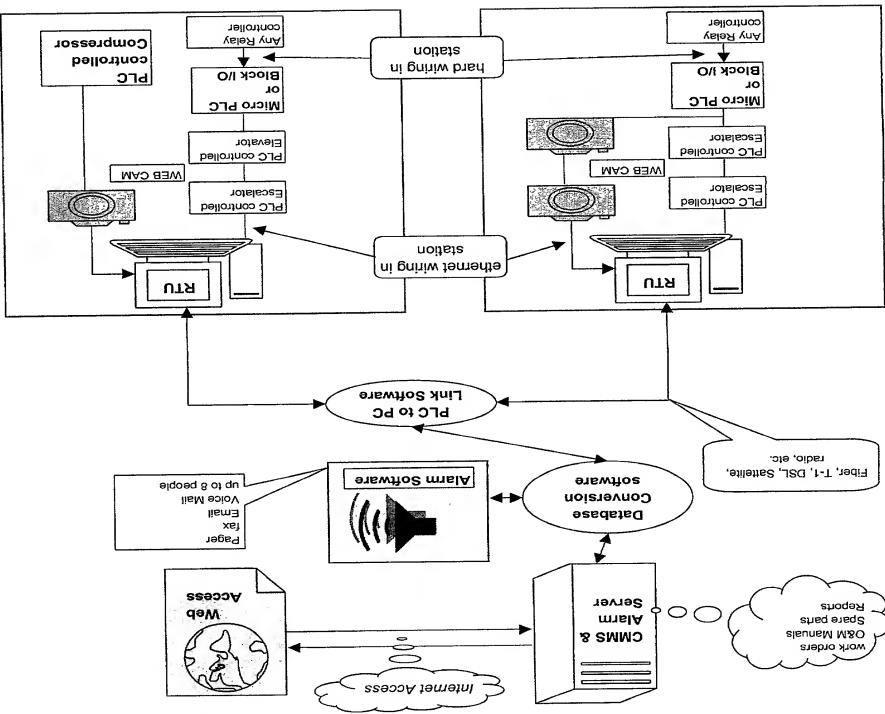


FIG. 2



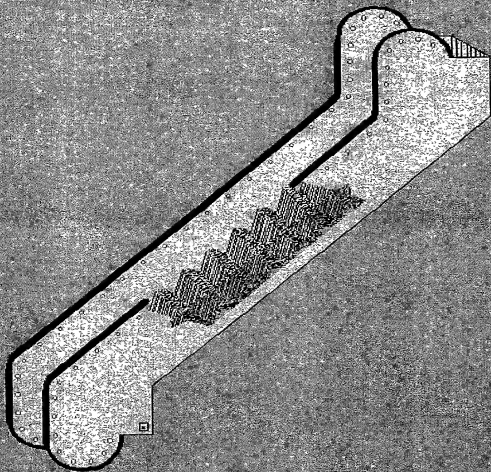
7 5 1

Fig 4



200220

Escalator A



Combi Force	
Deceleration Rate (Feet Per Sec. Sq.)	
Stop Distance (Inches)	
Right Hand Rail Speed (Feet Per Minute)	
Left Hand Rail Speed (Feet Per Minute)	
Step Speed (Feet Per Minute)	
Escalator Amps	
Escalator Volts	
Escalator Power KWH	
Escalator Power Factor	
Escalator Total Running (Hrs Min)	483:44
Running Time Since Last Fault (Hrs Min)	304:12
Total Run Time Down (Hrs Min)	327:46
Total Run Time Up (Hrs Min)	75:38

Main Map

Web Cam

Broad St

QuickView

Alarm

F Report

V Report

V Help

P Help

Escalator A

QuickStationStatus - Display

Comb Force

Deceleration Ra

Stop Distance (t

Right Hand Rail

Left Hand Rail S

Step Speed (Re

Escalator Arms

Escalator Volts

Escalator Power

Escalator Power Factor

Escalator Total Running (Hrs Min)

Running Time Since Last Fault (Hrs Min)

Total Run Time Down (Hrs Min)

Total Run Time Up (Hrs Min)

Emergency Stop Switch

• Pit Stop Switch

• Broken Hand Rail

• Broken Step Chain

• Comb Impact-Upper

• Comb Impact-Lower

• Handrail Entry-Upper

• Handrail Entry-Lower

• Broken Drive Chain

• Missing Step-Upper

• Missing Step-Lower

• Skirt Obstruction

• Step Level-Upper

• Step Level-Lower

• Step Upthrust-Upper

• Step Upthrust-Lower

• Break Wear

• Drive Motor Temp

• Under/Over Speed

• Handrail Speed

• Reversal Stop Device

• Other See Display

Close

Main Map

Web Cam

Broad St

QuickView

Alarm

F-Report

V-Report

V-Help

P-Help

Work Order 1072		SMC Fault Generated - Escalator Down!!!		WO Priority <input type="text" value="WO"/>	
Location		Cell B. Morse Station		Loc/Eq Priority <input type="text" value="Loc"/>	
Equipment		Escalator 101 at Cell B. Morse Station		Equipment Up? <input checked="" type="checkbox"/>	
Reported By		FIC		Warranty Date <input type="text" value=""/>	
Status		WAPPR		Work Type <input type="text" value=""/>	
GL Account		<input type="text" value=""/>		Charge to Store? <input type="text" value="N"/>	
Repaired By Date		2/20/200		Work Phone <input type="text" value=""/>	
Status Date		2/20/200		Has Follow-up Work? <input type="text" value="N"/>	
Job Plan		<input type="text" value=""/>		Originating WO <input type="text" value=""/>	
Safety Plan		<input type="text" value=""/>		Responsibility <input type="text" value=""/>	
PM		<input type="text" value=""/>		Supervisor <input type="text" value=""/>	
Service Contract		<input type="text" value=""/>		Labor Group <input type="text" value=""/>	
Start		<input type="text" value=""/>		Lead Craft/Person <input type="text" value=""/>	
Target		<input type="text" value=""/>		By <input type="text" value=""/>	
Scheduler		<input type="text" value=""/>		Date <input type="text" value=""/>	
Actual		<input type="text" value=""/>		6/6/1993	
Completion		<input type="text" value=""/>		Crew <input type="text" value=""/>	
Estimated Duration		0:00		Inhibit/Up? <input type="checkbox"/>	
Remaining Duration		<input type="text" value=""/>			